PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further correspondence including the Patent, advance orders and notificatio indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the				
38456 7590 11/15/2006				Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
		3/2000	,	Ce	rtificate of	Mailing or Transn	nission	
DENIRO/RAMBUS 575 MARKET STREET SUITE 2500				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
								SAN FRANCIS
			-				(Signature)	
	¥		ŀ		- 1346 Walter Company		(Date)	
APPLICATION NO.	FILING DATE	·	FIRST NAMED INVENT	OR	ATTORNE	CONFIRMATION NO.		
09/891,578	09/891,578 06/25/2001		Jun Kim		RAMB-01067US0		3316	
TITLE OF INVENTION	I: DETERMINING PHA	SE RELATIONSHIPS U	ISING DIGITAL PHAS	E VALUES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TO	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0		\$1700	02/15/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
HA, DAC V		2611	375-371000					
1. Change of corresponde CFR 1.363).		2. For printing on the	1 0 /		₁ Vierra	Magen		
Change of correspondence Address form PTO/SE	ondence address (or Char 3/122) attached.	nge of Correspondence	(1) the names of up or agents OR, alterna	•			& DeNiro LL	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	TO BE PRINTED ON T	L	•			And the second s	
					ee is identif	ied below, the docu	ment has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has be recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	mbus Inc.	Los Altos, California						
Di Lita				•				
Please check the appropria	ate assignee category or	categories (will not be pri	inted on the patent):	Individual 🛎 Co	rporation or	other private group	entity Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown a feet shown							own above)	
☐ Issue Fee ☐ A check i ☐ Publication Fee (No small entity discount permitted) ☐ Payment								
Advance Order - #	of Copies	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 501826 (enclose an extra copy of this form).						
5. Change in Entity State	s (from status indicated SMALL ENTITY status	above)						
NOTE: The Issue Fee and interest as shown by the re			b. Applicant is no lo from anyone other than Office.	the applicant; a regis	tered attorne	ey or agent; or the a	ssignee or other party in	
		DeNiro/				ary 13, 2		
		DeNiro				35,854		
This collection of informat an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 22313 Under the Paperwork Redu	ion is required by 37 CF ality is governed by 35 L application form to the U is for reducing this burd ginia 22313-1450. DO N	R 1.311. The information I.S.C. 122 and 37 CFR I JSPTO. Time will vary of en, should be sent to the NOT SEND FEES OR CO	n is required to obtain or .14. This collection is es depending upon the indi Chief Information Offic OMPLETED FORMS T	retain a benefit by the timated to take 12 m vidual case. Any con er, U.S. Patent and T O THIS ADDRESS.	e public whi inutes to con ments on the rademark O SEND TO:	ich is to file (and by mplete, including ga he amount of time y office, U.S. Departm Commissioner for l	the USPTO to process) athering, preparing, and you require to complete ent of Commerce, P.O. Patents, P.O. Box 1450,	